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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 53893-5006-02	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postages as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on <u>December 2, 2005</u> . Signature _____ Typed or printed name: Anne Scallatino		In re Application of: Kazazian, Jr. et al.	
		Application Number: 09/653,812	
		Filed: September 1, 2000	
		For: Compositions and Methods of Use of Mammalian Retrotransposons	
		Art Unit: 1632	Examiner: Anne Marie Falk, Ph.D.
Applicant(s) hereby appeal(s) to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1)) \$500.00			
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$250.00			
<input checked="" type="checkbox"/> A check is enclosed in the amount of \$250.00 for the Notice of Appeal fee.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-0573</u> . I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> A petition for a three month extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. \$510.00			
I am the			
<input type="checkbox"/> applicant/inventor		Signature: <u>Kathryn Doyle</u>	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is Enclosed. (Form PTO/SB/96)		Typed or printed name: Kathryn Doyle, Ph.D., J.D.	
<input checked="" type="checkbox"/> attorney of agent of record. Registration Number: 36,317		Telephone Number: <u>215-988-2902</u>	
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34:		Date: <u>December 2, 2005</u>	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.*			
<input checked="" type="checkbox"/> Total of <u>1</u> form is submitted.			

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